



Cypress County Emergency Services
FIRE SERVICES APPLICATION

LAST NAME:	GIVEN NAME (S):	
ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
HOME PHONE:	CELL PHONE:	
HIGH SCHOOL DIPLOMA/GED: <input type="checkbox"/> YES <input type="checkbox"/> NO		
DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO CLASS: DEMERITS:		
Have you had a criminal conviction for which a pardon has NOT been granted? <input type="checkbox"/> YES <input type="checkbox"/> NO A criminal record with vulnerable sector check must be obtained and is a mandatory condition if a conditional offer is made.		
Are you legally entitled to work in Canada? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Station Applying For: <input type="checkbox"/> Box Springs <input type="checkbox"/> Dunmore <input type="checkbox"/> Elkwater <input type="checkbox"/> Hilda <input type="checkbox"/> Irvine <input type="checkbox"/> One Four <input type="checkbox"/> Schuler <input type="checkbox"/> Seven Persons <input type="checkbox"/> Walsh		

EMPLOYMENT HISTORY (INCLUDE RELATED VOLUNTEER EXPERIENCE)

MOST RECENT EMPLOYER:	
SUPERVISOR'S NAME:	
DATE STARTED:	DATE LEFT:
POSTION:	
RESPONSIBILITIES:	

PREVIOUS EMPLOYER:	
SUPERVISOR'S NAME:	
DATE STARTED:	DATE LEFT:
POSTION:	
RESPONSIBILITIES:	

PREVIOUS EMPLOYER:	
SUPERVISOR'S NAME:	
DATE STARTED:	DATE LEFT:
POSTION:	
RESPONSIBILITIES:	

PREVIOUS EMPLOYER:	
SUPERVISOR'S NAME:	
DATE STARTED:	DATE LEFT:
POSTION:	
RESPONSIBILITIES:	

AVAILABILITY

What is your availability for a paid-on call firefighter? <i>Please specify during the week and weekends.</i>	
Daytime 8 a.m -5 p.m.	
Evening 5 p.m. - 12 a.m	
Night 12 a.m. - 8 a.m.	
Training as per FP 01- required to meet 16 out 24 training sessions per year. <input type="checkbox"/> YES <input type="checkbox"/> NO	

FIRE RELATED TRAINING

Please check any that apply.

<input type="checkbox"/> Standard First Aid/CPR	<input type="checkbox"/> ICS100 (Incident Command System)
<input type="checkbox"/> NFPA 1001 Level 1 <input type="checkbox"/> NFPA 1001 Level 2	<input type="checkbox"/> NFPA 1072 Awareness <input type="checkbox"/> NFPA 1072 Operations <input type="checkbox"/> NFPA 1072 Technical
<input type="checkbox"/> NFPA 1002 Driver <input type="checkbox"/> NFPA 1002 Operator	<input type="checkbox"/> NFPA 1006 Rope Rescue <input type="checkbox"/> NFPA 1006 Confined Space
<input type="checkbox"/> NFPA 1051 Wildland Firefighting	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

- **Please attach a resume and copies of any First Aid/CPR certificates if applicable or any further information regarding skills and abilities that are related to the position you are applying for.**
- **We would also like 2 or 3 work references must be provided at the time of the interview.**
- **All applicants are thanked for their interest and will be contacted if chosen for an interview.**

The personal information requested on this form is being collected under the authority of Alberta’s Freedom of Information Privacy Act, Section 33c and is protected under the Act. It will be used to determine whether the applicant is suitable and qualified for appointment to a paid on call volunteer position with Cypress County Fire Services. If accepted as a paid on call volunteer a mandatory criminal background check and a driver’s license abstract (under 6 demerits) must be presented before volunteering commences.

APPLICANT’S DECLARATION

I CERTIFY THAT ALL STATEMENTS IN THIS APPLICATION, HEALTH QUESTIONNAIRE AND MY ATTACHED RESUME ARE TRUE. I AGREE AND UNDERSTAND THAT ANY MISSTATEMENT OF MATERIAL FACTS IN THS APPLICATION WILL CAUSE LOSS OF ALL RIGHT TO VOLUNTEER WITH CYPRESS COUNTY FIRE SERVICES.

Signature

Date